		MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET CLAIR							SERIAL NO.					FILING DATE		
									APPLICANT(S)							
	AS	AS FILED		AFTER 18T AMENDMENT		AFTER 2ND AMENDMENT			F		F		F			
	IND	DEP	MD ME	DEP	- BND	DEP	1		#ND	DEP	IND	1				
1							1	51		DEF	1	DEP	- IND	 		
2	_						1	52					 	┪—		
3		1 / .]	53				1	1	+		
4	↓	1/-	<u> </u>		<u> </u>] [54				1		+		
5		1./_		ļ] [55					1	 		
6	 	1-1-		<u> </u>	!	ļ	1 1	56								
7_		+]]	57								
8]	1	ļ	 			1 1	58				<u> </u>				
9	-	-	 	ļ——			{	59				 				
10	1	1/	 	 			 	60				ļ		<u> </u>		
11	 	li -	 				}	61			 					
13	1	1					}	62			<u> </u>	 -		<u> </u>		
14	1						l f	63				 -i		 		
15					-			64 65				 				
16								66				 				
17							t	67						-		
18]							68						1		
19								69						 		
20	LI							70						_		
21								71								
22							1	72								
23	-/							73								
24	/							74								
25							L	75								
26	-/							76								
27	 						ļ_	77								
28	 						Ļ	78								
29 30							-	79								
31	 						-	80								
32	 						-	81								
33							-	82								
34		-					-	83 84								
35						-		85								
36				-			F	86		- 						
37							<u> </u>	87								
38								88								
39								89								
40		\						90								
41		<u>\</u>	[91	\Box							
42		\					<u></u>	92								
43		-\-					<u> </u>	93								
44		_ `						94	·							
45 46							-	95								
46 47							-	96								
18				 -			<u> </u>	97								
49				 -			 	98				 -				
50							1-	99								
				. 		-	 	100				- +				
L IND.		_↓		_ -		1 1	10	TAL IND.		1 1				1		
<u>.</u>	-		1**	_₹	4	-	DEI	1/4	←	▼	-	- ₹	4-	+		

•